

**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

<b>In the Matter of the Accusation Against:</b>	)	
	)	
<b>TYRON CLEON REECE, M.D.</b>	)	<b>Case No. 11-2010-211926</b>
	)	
<b>Physician's and Surgeon's</b>	)	
<b>Certificate No. A 31509</b>	)	
	)	
<b>Respondent</b>	)	
_____	)	


**DECISION AND ORDER**

**The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.**

**This Decision shall become effective at 5:00 p.m. on December 24, 2014.**

**IT IS SO ORDERED: November 24, 2014.**

**MEDICAL BOARD OF CALIFORNIA**

By:   
**Dev Gnanadev, M.D., Chair**  
**Panel B**

1 KAMALA D. HARRIS  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 CHRIS LEONG  
Deputy Attorney General  
4 State Bar No. 141079  
California Department of Justice  
5 300 So. Spring Street, Suite 1702  
Los Angeles, CA 90013  
6 Telephone: (213) 897-2575  
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7 E-mail: chris.leong@doj.ca.gov  
*Attorneys for Complainant*

8  
9 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 11-2010-211926

12 **TYRON C. REECE, M.D.**  
13 **321 E. Hillcrest Blvd.**  
**Inglewood, CA 90301**

OAH No. 2014020139

14 **Physician's and Surgeon's Certificate No.**  
15 **A 31509**

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

Respondent.

16  
17 In the interest of a prompt and speedy settlement of this matter, consistent with the public  
18 interest and the responsibility of the Medical Board of California of the Department of Consumer  
19 Affairs (Board), the parties hereby agree to the following Stipulated Settlement and Disciplinary  
20 Order which will be submitted to the Board for approval and adoption as the final disposition of  
21 the Accusation.

22 **PARTIES**

23 1. Kimberly Kirchmeyer ("Complainant") is the Executive Director of the Board. She  
24 brought this action solely in her official capacity and is represented in this matter by Kamala D.  
25 Harris, Attorney General of the State of California, by Chris Leong, Deputy Attorney General.

26 2. Respondent TYRON C. REECE, M.D. ("Respondent") is represented in this  
27 proceeding by attorney Duane R. Folke, Esq., whose address is: 3450 Wilshire Boulevard, Suite  
28 108-17, Los Angeles, CA 90010-2208.

3. On or about September 1, 1977, the Board issued Physician's and Surgeon's Certificate No. A 31509 to Respondent. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 11-2010-211926 and will expire on October 31, 2015, unless renewed.

## JURISDICTION

4. Accusation No. 11-2010-211926 was filed before the Board and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on November 14, 2013. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 11-2010-211926 is attached as Exhibit A and is incorporated herein by reference.

## ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 11-2010-211926. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

## CULPABILITY

9. Respondent admits the truth of each and every charge and allegation in the First Cause for Discipline in Accusation No. 11-2010-211926.

10. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

11. Respondent agrees that if he ever petitions for early termination of probation or modification of probation, or if the board ever petitions for revocation of probation, all of the charges and allegations contained in Accusation No. 11-2010-211926 shall be deemed true, correct and fully admitted by Respondent for purposes of that proceeding or any other licensing proceeding involving Respondent in the State of California.

## CONTINGENCY

12. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

13. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including Portable Document Format (PDF) and facsimile signatures thereto, shall have the same force and effect as the originals.

14. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

## DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 31509 issued to Respondent TYRON C. REECE, M.D. (Respondent) is revoked. However, the revocation is

1 stayed and Respondent is placed on probation for seven (7) years on the following terms and  
2 conditions.

3 1. ACTUAL SUSPENSION. As part of probation, Respondent is suspended from the  
4 practice of medicine for ninety (90 days) beginning the sixteenth (16th) day after the effective  
5 date of this decision.

6 2. COMMUNITY SERVICE - FREE SERVICES. Within 60 calendar days of the  
7 effective date of this Decision, Respondent shall submit to the Board or its designee for prior  
8 approval a community service plan in which Respondent shall within the first 2 years of  
9 probation, provide 100 hours of free services (e.g., medical or nonmedical) to a community or  
10 non-profit organization. If the term of probation is designated for 2 years or less, the community  
11 service hours must be completed not later than 6 months prior to the completion of probation.

12 Prior to engaging in any community service Respondent shall provide a true copy of the  
13 Decision(s) to the chief of staff, director, office manager, program manager, officer, or the chief  
14 executive officer at every community or non-profit organization where Respondent provides  
15 community service and shall submit proof of compliance to the Board or its designee within 15  
16 calendar days. This condition shall also apply to any change(s) in community service.

17 Community service performed prior to the effective date of the Decision shall not be  
18 accepted in fulfillment of this condition.

19 3. EDUCATION COURSE. Within 60 calendar days of the effective date of this  
20 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee  
21 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours  
22 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at  
23 correcting any areas of deficient practice or knowledge and shall be Category I certified. The  
24 educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to  
25 the Continuing Medical Education (CME) requirements for renewal of licensure. Following the  
26 completion of each course, the Board or its designee may administer an examination to test  
27 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65  
28 hours of CME of which 40 hours were in satisfaction of this condition.

1           4.   PREScribing PRACTICES COURSE. Within 60 calendar days of the effective  
2 date of this Decision, Respondent shall enroll in a course in prescribing practices equivalent to the  
3 Prescribing Practices Course at the Physician Assessment and Clinical Education Program,  
4 University of California, San Diego School of Medicine (Program), approved in advance by the  
5 Board or its designee. Respondent shall provide the program with any information and documents  
6 that the Program may deem pertinent. Respondent shall participate in and successfully complete  
7 the classroom component of the course not later than six (6) months after Respondent's initial  
8 enrollment. Respondent shall successfully complete any other component of the course within  
9 one (1) year of enrollment. The prescribing practices course shall be at Respondent's expense  
10 and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of  
11 licensure.

12           A prescribing practices course taken after the acts that gave rise to the charges in the  
13 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
14 or its designee, be accepted towards the fulfillment of this condition if the course would have  
15 been approved by the Board or its designee had the course been taken after the effective date of  
16 this Decision.

17           Respondent shall submit a certification of successful completion to the Board or its  
18 designee not later than 15 calendar days after successfully completing the course, or not later than  
19 15 calendar days after the effective date of the Decision, whichever is later.

20           5.   PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of  
21 the effective date of this Decision, Respondent shall enroll in a professionalism program that  
22 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.  
23 Respondent shall participate in and successfully complete that program. Respondent shall  
24 provide any information and documents that the program may deem pertinent. Respondent shall  
25 successfully complete the classroom component of the program not later than six (6) months after  
26 Respondent's initial enrollment, and the longitudinal component of the program not later than the  
27 time specified by the program, but no later than one (1) year after attending the classroom  
28 component. The professionalism program shall be at Respondent's expense and shall be in

1 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

2 A professionalism program taken after the acts that gave rise to the charges in the  
3 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board  
4 or its designee, be accepted towards the fulfillment of this condition if the program would have  
5 been approved by the Board or its designee had the program been taken after the effective date of  
6 this Decision.

7 Respondent shall submit a certification of successful completion to the Board or its  
8 designee not later than 15 calendar days after successfully completing the program or not later  
9 than 15 calendar days after the effective date of the Decision, whichever is later.

10 6. PSYCHIATRIC EVALUATION. Within 30 calendar days of the effective date of  
11 this Decision, and on whatever periodic basis thereafter may be required by the Board or its  
12 designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological  
13 testing, if deemed necessary) by a Board-appointed board certified psychiatrist, who shall  
14 consider any information provided by the Board or designee and any other information the  
15 psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its  
16 designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not  
17 be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all  
18 psychiatric evaluations and psychological testing.

19 Respondent shall comply with all restrictions or conditions recommended by the evaluating  
20 psychiatrist within 15 calendar days after being notified by the Board or its designee.

21 7. MEDICAL EVALUATION AND TREATMENT. Within 30 calendar days of the  
22 effective date of this Decision, and on a periodic basis thereafter as may be required by the Board  
23 or its designee, Respondent shall undergo a medical evaluation by a Board-appointed physician  
24 who shall consider any information provided by the Board or designee and any other information  
25 the evaluating physician deems relevant and shall furnish a medical report to the Board or its  
26 designee. Respondent shall provide the evaluating physician any information and documentation  
27 that the evaluating physician may deem pertinent.

28 Following the evaluation, Respondent shall comply with all restrictions or conditions

recommended by the evaluating physician within 15 calendar days after being notified by the Board or its designee. If Respondent is required by the Board or its designee to undergo medical treatment, Respondent shall within 30 calendar days of the requirement notice, submit to the Board or its designee for prior approval the name and qualifications of a California licensed treating physician of Respondent's choice. Upon approval of the treating physician, Respondent shall within 15 calendar days undertake medical treatment and shall continue such treatment until further notice from the Board or its designee.

The treating physician shall consider any information provided by the Board or its designee or any other information the treating physician may deem pertinent prior to commencement of treatment. Respondent shall have the treating physician submit quarterly reports to the Board or its designee indicating whether or not the Respondent is capable of practicing medicine safely. Respondent shall provide the Board or its designee with any and all medical records pertaining to treatment, the Board or its designee deems necessary.

If, prior to the completion of probation, Respondent is found to be physically incapable of resuming the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that Respondent is physically capable of resuming the practice of medicine without restrictions. Respondent shall pay the cost of the medical evaluation(s) and treatment.

8. MONITORING - PRACTICE/BILLING. Within 30 calendar days of the effective date of this Decision, Respondent shall participate in a professional enhancement program equivalent to the one offered by the Physician Assessment and Clinical Education Program at the University of California, San Diego School of Medicine, that includes, at minimum, quarterly chart review, semi-annual practice assessment, and semi-annual review of professional growth and education. Respondent shall participate in the professional enhancement program at Respondent's expense during the term of probation.

9. PROHIBITED PRACTICE. During probation, Respondent is prohibited from prescribing any controlled substances. After the effective date of this Decision, all patients being treated by the Respondent shall be notified that the Respondent is prohibited from prescribing any



1 controlled substances. Any new patients must be provided this notification at the time of their  
2 initial appointment.

3 Respondent shall maintain a log of all patients to whom the required oral notification was  
4 made. The log shall contain the: 1) patient's name, address and phone number; 2) patient's  
5 medical record number, if available; 3) the full name of the person making the notification; 4) the  
6 date the notification was made; and 5) a description of the notification given. Respondent shall  
7 keep this log in a separate file or ledger, in chronological order, shall make the log available for  
8 immediate inspection and copying on the premises at all times during business hours by the Board  
9 or its designee, and shall retain the log for the entire term of probation.

10 10. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
11 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
12 Chief Executive Officer at every hospital where privileges or membership are extended to  
13 Respondent, at any other facility where Respondent engages in the practice of medicine,  
14 including all physician and locum tenens registries or other similar agencies, and to the Chief  
15 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
16 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
17 calendar days.

18 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

19 11. SUPERVISION OF PHYSICIAN ASSISTANTS. During probation, Respondent is  
20 prohibited from supervising physician assistants.

21 12. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules  
22 governing the practice of medicine in California and remain in full compliance with any court  
23 ordered criminal probation, payments, and other orders.

24 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations  
25 under penalty of perjury on forms provided by the Board, stating whether there has been  
26 compliance with all the conditions of probation.

27 Respondent shall submit quarterly declarations not later than 10 calendar days after the end  
28 of the preceding quarter.

1       14.   GENERAL PROBATION REQUIREMENTS.

2       Compliance with Probation Unit

3       Respondent shall comply with the Board's probation unit and all terms and conditions of  
4 this Decision.

5       Address Changes

6       Respondent shall, at all times, keep the Board informed of Respondent's business and  
7 residence addresses, email address (if available), and telephone number. Changes of such  
8 addresses shall be immediately communicated in writing to the Board or its designee. Under no  
9 circumstances shall a post office box serve as an address of record, except as allowed by Business  
10 and Professions Code section 2021(b).

11       Place of Practice

12       Respondent shall not engage in the practice of medicine in Respondent's or patient's place  
13 of residence, unless the patient resides in a skilled nursing facility or other similar licensed  
14 facility.

15       License Renewal

16       Respondent shall maintain a current and renewed California physician's and surgeon's  
17 license.

18       Travel or Residence Outside California

19       Respondent shall immediately inform the Board or its designee, in writing, of travel to any  
20 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty  
21 (30) calendar days.

22       In the event Respondent should leave the State of California to reside or to practice  
23 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of  
24 departure and return.

25       15.   INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be  
26 available in person upon request for interviews either at Respondent's place of business or at the  
27 probation unit office, with or without prior notice throughout the term of probation.

28       16.   NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or

1 its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
2 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
3 defined as any period of time Respondent is not practicing medicine in California as defined in  
4 Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month  
5 in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All  
6 time spent in an intensive training program which has been approved by the Board or its designee  
7 shall not be considered non-practice. Practicing medicine in another state of the United States or  
8 Federal jurisdiction while on probation with the medical licensing authority of that state or  
9 jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall  
10 not be considered as a period of non-practice.

11 In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
12 months, Respondent shall successfully complete a clinical training program that meets the criteria  
13 of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and  
14 Disciplinary Guidelines" prior to resuming the practice of medicine.

15 Respondent's period of non-practice while on probation shall not exceed two (2) years.

16 Periods of non-practice will not apply to the reduction of the probationary term.

17 Periods of non-practice will relieve Respondent of the responsibility to comply with the  
18 probationary terms and conditions with the exception of this condition and the following terms  
19 and conditions of probation: Obey All Laws; and General Probation Requirements.

20 17. COMPLETION OF PROBATION. Respondent shall comply with all financial  
21 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
22 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
23 be fully restored.

24 18. VIOLATION OF PROBATION. Failure to fully comply with any term or condition  
25 of probation is a violation of probation. If Respondent violates probation in any respect, the  
26 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and  
27 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,  
28 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have

1 continuing jurisdiction until the matter is final, and the period of probation shall be extended until  
2 the matter is final.

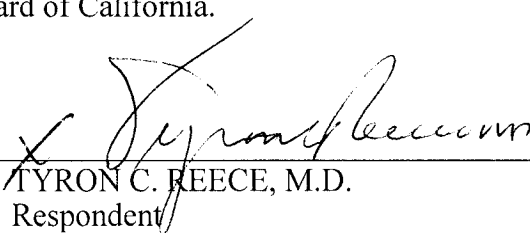
3 19. LICENSE SURRENDER. Following the effective date of this Decision, if  
4 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
5 the terms and conditions of probation, Respondent may request to surrender his or her license.  
6 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
7 determining whether or not to grant the request, or to take any other action deemed appropriate  
8 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
9 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
10 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
11 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
12 application shall be treated as a petition for reinstatement of a revoked certificate.

13 20. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
14 with probation monitoring each and every year of probation, as designated by the Board, which  
15 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
16 California and delivered to the Board or its designee no later than January 31 of each calendar  
17 year.

18  
19 ACCEPTANCE

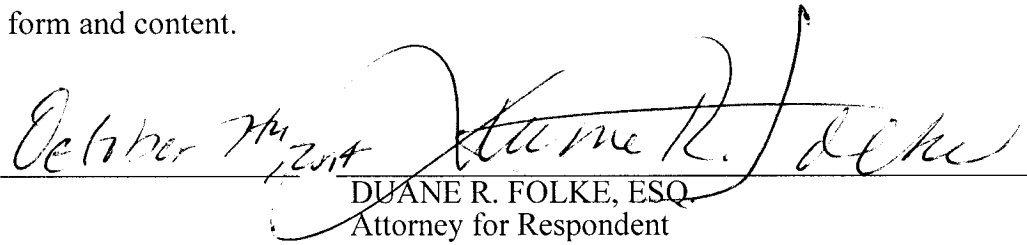
20 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully  
21 discussed it with my attorney, Duane R. Folke, Esq. I understand the stipulation and the effect it  
22 will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and  
23 Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the  
24 Decision and Order of the Medical Board of California.

25  
26 DATED: October 7, 2014

  
TYRON C. REECE, M.D.  
Respondent

1 I have read and fully discussed with Respondent TYRON C. REECE, M.D. the terms and  
2 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.  
3 I approve its form and content.

4  
5 DATED:

*October 7th, 2014*  
  
DUANE R. FOLKE, ESQ.  
Attorney for Respondent

7  
8 ENDORSEMENT

9 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully  
10 submitted for consideration by the Medical Board of California.

11 Dated:

*October 7, 2014*

Respectfully submitted,

KAMALA D. HARRIS  
Attorney General of California  
E. A. JONES III  
Supervising Deputy Attorney General



CHRIS LEONG  
Deputy Attorney General  
Attorneys for Complainant

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**Exhibit A**

**Accusation No. 11-2010-211926**

1 KAMALA D. HARRIS  
Attorney General of California  
2 E. A. JONES III  
Supervising Deputy Attorney General  
3 CHRIS LEONG  
Deputy Attorney General  
4 State Bar No. 141079  
California Department of Justice  
5 300 So. Spring Street, Suite 1702  
Los Angeles, CA 90013  
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7 E-mail: chris.leong@doj.ca.gov  
*Attorneys for Complainant*

FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO NOV 14 2013  
BY ANALYST

8  
9 **BEFORE THE**  
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10 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

Case No. 11-2010-211926

12 **TYRON C. REECE, M.D.**  
13 321 E. Hillcrest Blvd.,  
14 Inglewood, California 90301

**A C C U S A T I O N**

15 Physician's and Surgeon's Certificate No. A 31509

16 Respondent.

17 Complainant alleges:

18 **PARTIES**

- 19 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official  
20 capacity as the Interim Executive Director of the Medical Board of California (Board).  
21 2. On or about September 1, 1977, the Board issued Physician's and Surgeon's Certificate  
22 Number A 31509 to TYRON C. REECE, M.D. (Respondent). The Physician's and Surgeon's  
23 Certificate was in full force and effect at all times relevant to the charges brought herein and will  
24 expire on October 31, 2015, unless renewed.

25 **JURISDICTION**

- 26 3. This Accusation is brought before the Board, under the authority of the following laws.  
27 All section references are to the Business and Professions Code (Code) unless otherwise  
28 indicated.

1  
2 4. Section 2234 of the Code, states:

3 "The board shall take action against any licensee who is charged with unprofessional  
4 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not  
5 limited to, the following:

6 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the  
7 violation of, or conspiring to violate any provision of this chapter.

8 "(b) Gross negligence.

9 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or  
10 omissions. An initial negligent act or omission followed by a separate and distinct departure from  
11 the applicable standard of care shall constitute repeated negligent acts.

12 "(1) An initial negligent diagnosis followed by an act or omission medically  
13 appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.

14 "(2) When the standard of care requires a change in the diagnosis, act, or omission  
15 that constitutes the negligent act described in paragraph (1), including, but not limited to, a  
16 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs  
17 from the applicable standard of care, each departure constitutes a separate and distinct  
18 breach of the standard of care.

19 "(d) Incompetence.

20 "(e) The commission of any act involving dishonesty or corruption which is substantially  
21 related to the qualifications, functions, or duties of a physician and surgeon.

22 "(f) Any action or conduct which would have warranted the denial of a certificate.

23 "(g) The practice of medicine from this state into another state or country without meeting  
24 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not  
25 apply to this subdivision. This subdivision shall become operative upon the implementation of the  
26 proposed registration program described in Section 2052.5.

27 "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and  
28 participate in an interview scheduled by the mutual agreement of the certificate holder and the



1 board. This subdivision shall only apply to a certificate holder who is the subject of an  
2 investigation by the board."

3 5. Section 2227 of the Code states:

4 "(a) A licensee whose matter has been heard by an administrative law judge of the Medical  
5 Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default  
6 has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary  
7 action with the board, may, in accordance with the provisions of this chapter:

8 "(1) Have his or her license revoked upon order of the board.

9 "(2) Have his or her right to practice suspended for a period not to exceed one year  
10 upon order of the board.

11 "(3) Be placed on probation and be required to pay the costs of probation monitoring  
12 upon order of the board.

13 "(4) Be publicly reprimanded by the board. The public reprimand may include a  
14 requirement that the licensee complete relevant educational courses approved by the board.

15 "(5) Have any other action taken in relation to discipline as part of an order of  
16 probation, as the board or an administrative law judge may deem proper.

17 "(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical  
18 review or advisory conferences, professional competency examinations, continuing education  
19 activities, and cost reimbursement associated therewith that are agreed to with the board and  
20 successfully completed by the licensee, or other matters made confidential or privileged by  
21 existing law, is deemed public, and shall be made available to the public by the board pursuant to  
22 Section 803.1."

23 6. Section 2236 of the Code states:

24 A(a) The conviction of any offense substantially related to the qualifications, functions, or  
25 duties of a physician and surgeon constitutes unprofessional conduct within the meaning of this  
26 chapter [Chapter 5, the Medical Practice Act]. The record of conviction shall be conclusive  
27 evidence only of the fact that the conviction occurred.

1 A(b) The district attorney, city attorney, or other prosecuting agency shall notify the  
2 Division of Medical Quality of the pendency of an action against a licensee charging a felony or  
3 misdemeanor immediately upon obtaining information that the defendant is a licensee. The notice  
4 shall identify the licensee and describe the crimes charged and the facts alleged. The prosecuting  
5 agency shall also notify the clerk of the court in which the action is pending that the defendant is a  
6 licensee, and the clerk shall record prominently in the file that the defendant holds a license as a  
7 physician and surgeon.

8 A(c) The clerk of the court in which a licensee is convicted of a crime shall, within 48  
9 hours after the conviction, transmit a certified copy of the record of conviction to the board. The  
10 division may inquire into the circumstances surrounding the commission of a crime in order to fix  
11 the degree of discipline or to determine if the conviction is of an offense substantially related to  
12 the qualifications, functions, or duties of a physician and surgeon.

13 A(d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is deemed to  
14 be a conviction within the meaning of this section and Section 2236.1. The record of conviction  
15 shall be conclusive evidence of the fact that the conviction occurred.@

16 7. Section 2238 of the Code states:

17 AA violation of any federal statute or federal regulation or any of the statutes or regulations  
18 of this state regulating dangerous drugs or controlled substances constitutes unprofessional  
19 conduct.@

20 8. Section 725 of the Code states:

21 "(a) Repeated acts of clearly excessive prescribing, furnishing, dispensing, or administering  
22 of drugs or treatment, repeated acts of clearly excessive use of diagnostic procedures, or repeated  
23 acts of clearly excessive use of diagnostic or treatment facilities as determined by the standard of  
24 the community of licensees is unprofessional conduct for a physician and surgeon, dentist,  
25 podiatrist, psychologist, physical therapist, chiropractor, optometrist, speech-language pathologist,  
26 or audiologist.

27 "(b) Any person who engages in repeated acts of clearly excessive prescribing or  
28 administering of drugs or treatment is guilty of a misdemeanor and shall be punished by a fine of

1 not less than one hundred dollars (\$100) nor more than six hundred dollars (\$600), or by  
2 imprisonment for a term of not less than 60 days nor more than 180 days, or by both that fine and  
3 imprisonment.

4 "(c) A practitioner who has a medical basis for prescribing, furnishing, dispensing, or  
5 administering dangerous drugs or prescription controlled substances shall not be subject to  
6 disciplinary action or prosecution under this section.

7 "(d) No physician and surgeon shall be subject to disciplinary action pursuant to this section  
8 for treating intractable pain in compliance with Section 2241.5."

9 9. Section 650 of the Code states:

10 "(a) Except as provided in Chapter 2.3 (commencing with Section 1400) of Division 2 of  
11 the Health and Safety Code, the offer, delivery, receipt, or acceptance by any person licensed  
12 under this division or the Chiropractic Initiative Act of any rebate, refund, commission,  
13 preference, patronage dividend, discount, or other consideration, whether in the form of money or  
14 otherwise, as compensation or inducement for referring patients, clients, or customers to any  
15 person, irrespective of any membership, proprietary interest, or coownership in or with any person  
16 to whom these patients, clients, or customers are referred is unlawful.

17 "(b) The payment or receipt of consideration for services other than the referral of patients  
18 which is based on a percentage of gross revenue or similar type of contractual arrangement shall  
19 not be unlawful if the consideration is commensurate with the value of the services furnished or  
20 with the fair rental value of any premises or equipment leased or provided by the recipient to the  
21 payer.

22 "(c) The offer, delivery, receipt, or acceptance of any consideration between a federally  
23 qualified health center, as defined in Section 1396d(l)(2)(B) of Title 42 of the United States Code,  
24 and any individual or entity providing goods, items, services, donations, loans, or a combination  
25 thereof to the health center entity pursuant to a contract, lease, grant, loan, or other agreement, if  
26 that agreement contributes to the ability of the health center entity to maintain or increase the  
27 availability, or enhance the quality, of services provided to a medically underserved population  
28

1 served by the health center, shall be permitted only to the extent sanctioned or permitted by  
2 federal law.

3 “(d) Except as provided in Chapter 2.3 (commencing with Section 1400) of Division 2 of  
4 the Health and Safety Code and in Sections 654.1 and 654.2 of this code, it shall not be unlawful  
5 for any person licensed under this division to refer a person to any laboratory, pharmacy, clinic  
6 (including entities exempt from licensure pursuant to Section 1206 of the Health and Safety  
7 Code), or health care facility solely because the licensee has a proprietary interest or coownership  
8 in the laboratory, pharmacy, clinic, or health care facility, provided, however, that the licensee's  
9 return on investment for that proprietary interest or coownership shall be based upon the amount  
10 of the capital investment or proportional ownership of the licensee which ownership interest is not  
11 based on the number or value of any patients referred. Any referral excepted under this section  
12 shall be unlawful if the prosecutor proves that there was no valid medical need for the referral.

13 “(e) Except as provided in Chapter 2.3 (commencing with Section 1400) of Division 2 of  
14 the Health and Safety Code and in Sections 654.1 and 654.2 of this code, it shall not be unlawful  
15 to provide nonmonetary remuneration, in the form of hardware, software, or information  
16 technology and training services, as described in subsections (x) and (y) of Section 1001.952 of  
17 Title 42 of the Code of Federal Regulations, as amended October 4, 2007, as published in the  
18 Federal Register (72 Fed. Reg. 56632 and 56644), and subsequently amended versions.

19 “(f) "Health care facility" means a general acute care hospital, acute psychiatric hospital,  
20 skilled nursing facility, intermediate care facility, and any other health facility licensed by the  
21 State Department of Public Health under Chapter 2 (commencing with Section 1250) of Division  
22 2 of the Health and Safety Code.

23 “(g) A violation of this section is a public offense and is punishable upon a first conviction  
24 by imprisonment in a county jail for not more than one year, or by imprisonment pursuant to  
25 subdivision (h) of Section 1170 of the Penal Code, or by a fine not exceeding fifty thousand  
26 dollars (\$50,000), or by both that imprisonment and fine. A second or subsequent conviction is  
27 punishable by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code, or by  
28 that imprisonment and a fine of fifty thousand dollars (\$50,000).”

## INTRODUCTION

10. This Accusation involves prescriptions for medications regulated by the Comprehensive Drug Abuse Prevention and Control Act, passed into law in 1970. Title II of this law, the Controlled Substances Act, is the legal foundation of narcotics enforcement in the United States. The Controlled Substances Act regulates the manufacture, possession, movement, and distribution of drugs in our country. The Controlled Substances Act places all drugs into one of five schedules, or classifications, and is controlled by the Department of Justice and the Department of Health and Human Services, including the Federal Drug Administration. In 1972, California followed the federal lead by adopting the Uniform Controlled Substance Act. (Government Code §11153 et seq.).

11. The following delineates the five schedules with examples of drugs, medications, and information about each.

### 12. Schedule I Drugs

These drugs have NO safe, accepted medical use in the United States. This schedule includes drugs such as heroin, ecstasy, LSD, and crack cocaine. Schedule I drugs have a high tendency for abuse and have no accepted medical use. Pharmacies do not sell Schedule I drugs, and they are not available with a prescription by physician.

### 13. Schedule II Drugs

Schedule II drugs have a high tendency for abuse, may have an accepted medical use, and can produce dependency or addiction with chronic use. Of all legal prescription medications, Schedule II controlled substances have the highest abuse potential. These drugs can cause severe psychological or physical dependence. Schedule II drugs include certain narcotic, stimulant, and depressant drugs. Examples of Schedule II drugs include cocaine, opium, morphine, fentanyl, amphetamines, and methamphetamines.

Schedule II drugs may be available with a prescription by a physician, but not all pharmacies may carry them. These drugs require more stringent records and storage procedures than drugs in Schedules III and IV.

1           **14.     Schedule III Drugs**

2           Schedule III drugs have less potential for abuse or addiction than drugs in the first two  
3 schedules and have a currently accepted medical use. The abuse of Schedule III drugs may lead to  
4 moderate to high psychological dependence.

5           Examples of Schedule III drugs include codeine, hydrocodone with acetaminophen, or  
6 anabolic steroids. Schedule III drugs may be available with a prescription, but not all pharmacies  
7 may carry them.

8           **15.     Schedule IV Drugs**

9           Schedule IV drugs have a low potential for abuse that leads only to limited physical  
10 dependence or psychological dependence relative to drugs in Schedule III. Schedule IV drugs  
11 have a currently accepted medical use and have limited addictive properties. Schedule IV drugs  
12 have the same restrictions as Schedule III drugs.

13           Examples of Schedule IV drugs include xanax, valium, phenobarbital, and rohypnol  
14 (commonly known as the "date rape" drug). These drugs may be available with a prescription, but  
15 not all pharmacies may carry them.

16           **16.     Schedule V Drugs**

17           Schedule V drugs have a lower chance of abuse than Schedule IV drugs, have a currently  
18 accepted medical use in the United States, and lesser chance of dependence compared to Schedule  
19 IV drugs. This schedule includes such drugs as cough suppressants with codeine.

20                   **CONTROLLED SUBSTANCES AND DANGEROUS DRUGS**

21           **17.     Xanax** is a dangerous drug pursuant to Code section 4022. It is a Schedule IV  
22 Controlled Substance as designated by Health and Safety Code section 11057, subdivision (d)(1).  
23 Its generic name is Alprazolam and is used to relieve anxiety.

24           **18.     Hydrocodone** (as designated by Health and Safety Code section 11056,  
25 subdivision (e)(4))/APAP is an analgesic combination of a narcotic, Hydrocodone, and  
26 Acetaminophen. Acetaminophen, often abbreviated as APAP, is a peripherally acting analgesic  
27 agent found in many combination products and also available by itself. This combination product  
28 is used to treat moderate to moderately severe pain. In the U.S., formulations containing more

1 than 15 mg hydrocodone per dosage unit are considered Schedule II drugs. Those containing less  
2 than or equal to 15 mg per dosage unit in combination with acetaminophen or another non-  
3 controlled drug are called hydrocodone compounds and are considered Schedule III drugs.  
4 Hydrocodone (as designated by Health and Safety Code section 11055, subdivision (b)(1))(I) is  
5 not available in pure form in the United States due to a separate regulation. Hydrocodone is  
6 always sold combined with another drug. Hydrocodone is a dangerous drug within the meaning  
7 of code section 4022.

8 19. **Promethazine with codeine** is a dangerous drug pursuant to section 4022 of the  
9 Code. It is a Schedule IV controlled substance, as designated by Health and Safety Code section  
10 11057, subdivision (f)(4).

#### 11 FIRST CAUSE FOR DISCIPLINE

12 (Conviction of Substantially Related Crimes)

13 20. Respondent is subject to disciplinary action under section 2236 of the Code in that he  
14 has been convicted of crimes which are substantially related to the qualifications, functions, or  
15 duties of a physician and surgeon. The circumstances are as follows:

16 21. Since in or around 2006, Respondent has been writing prescriptions for controlled  
17 substances for money without seeing the patient. At various times, Respondent would receive a  
18 list containing, among other information, names of patients from about five individuals.  
19 Respondent would write prescriptions for controlled substances for the named patients. The  
20 prescriptions were taken to a pharmacy where they were filled for individuals, other than the  
21 named patients. Respondent received approximately \$60.00 for each prescription as more  
22 specifically set forth in paragraph 22 below.

23 22. On August 12, 2011, in the United States District Court, Southern District of  
24 California, Respondent was charged in count 1 of an indictment in a case entitled *United States*  
25 *vs. Tyron Reece, et al.*, case number 11CR3588-AJB, with conspiracy to distribute controlled  
26 substances, in violation of Title 21, United States Code, Section 841(a)(1). The indictment plead  
27 in part as follows:  
28

1                   **"CONSPIRACY TO DISTRIBUTE CONTROLLED SUBSTANCES**

2                   "2.     Beginning on a date unknown to the grand jury and continuing up to and  
3                   including August 10, 2011, within the Southern District of California, and elsewhere,  
4                   defendants ANTHONY WRIGHT, aka "Sam," CHARLES DABNEY, TYRON  
5                   REESE, MOSES BLACKMON, KIM MARTIN, and GLENN REYNALDO, did  
6                   knowingly and intentionally conspire and agree with Milton Farmer, charged  
7                   elsewhere, and each other and with others known and unknown to the grand jury, to  
8                   distribute controlled substances all in violation of Title 21, United States Code,  
9                   Section 841(a)(1).

10                                   **"MANNER AND MEANS**

11                                           **"ROLES OF THE DEFENDANTS**

12                   "3.     Defendant ANTHONY WRIGHT paid defendants MOSES BLACKMON and  
13                   GLENN REYNALDO cash for fraudulent medical prescriptions issued by TYRON  
14                   REECE which were used to illegally acquire Scheduled pharmaceutical drugs from co-  
15                   conspirators working at Dabney Pharmacy.

16                   "4.     Defendant CHARLES DABNEY, who was the manager of Dabney Pharmacy  
17                   since 1989, in exchange for cash, processed and filled defendant ANTHONY  
18                   WRIGHT's fraudulent medical prescriptions at the rate of approximately 90  
19                   prescriptions a week.

20                   "5.     Defendant TYRON REECE, a medical doctor licensed to practice medicine in  
21                   California, sold fraudulent medical prescriptions for 100 tablets of hydrocodone  
22                   (Schedule III), 100 tablets alprazolam (Schedule IV) and 1 pint of promethazine with  
23                   codeine (Schedule V) to defendants MOSES BLACKMON and GLENN REYNALDO  
24                   in exchange for \$60.00 cash on multiple occasions.

25                   "6.     Defendant KIM MARTIN, a receptionist/clerk at Dabney Pharmacy, received  
26                   and processed defendant ANTHONY WRIGHT's fraudulent prescriptions in exchange  
27                   for cash payments from defendant ANTHONY WRIGHT.  
28



**"OVERT ACTS**

"7. In furtherance of said conspiracy, and to effect the objects thereof, the following overt acts, among others, were committed within the Southern District of California, and elsewhere:

"a) On or about March 21, 2010, in Los Angeles, California, during a telephone conversation, defendant KIM MARTIN informed defendant ANTHONY WRIGHT that she had given fraudulent medical prescriptions to defendant CHARLES DABNEY for processing.

"b) "On about August 12, 2010, in Los Angeles, California, defendant TYRON REECE issued medical prescriptions to an individual for 100 tablets of hydrocodone (Schedule III), 100 tablets alprazolam (Schedule IV) and 1 pint of promethazine with codeine (Schedule V), without conducting a medical examination.

"c) On or about August 25, 2010, in San Diego, California, during a telephone conversation, defendant ANTHONY WRIGHT offered to sell tablets of oxycodone to a confidential source for \$25.00 a tablet.

"d) On or about November 29, 2010, in Los Angeles, California, during a telephone conversation, defendant MOSES BLACKMON informed defendant ANTHONY WRIGHT that she had fifteen prescriptions available for immediate delivery to ANTHONY WRIGHT.

"e) On or about March 14, 2011, in Los Angeles, California, during a telephone conversation, defendants CHARLES DABNEY and ANTHONY WRIGHT discussed how DABNEY maintained list of names for defendant ANTHONY WRIGHT to use to acquire fraudulent medical prescriptions.

"f) On or about March 28, 2011, in Los Angeles, California, during a telephone conversation, defendant GLENN REYNALDO informed ANTHONY WRIGHT that he would facilitate the delivery of fraudulent medical prescriptions to defendant KIM MARTIN at Dabney Pharmacy."

1       23. On August 12, 2011, a Warrant for the Arrest of Respondent was filed in the United  
2 States District Court. On August 16, 2011, Respondent was arrested by the U.S. Marshall.

3       24. On November 1, 2012, in the United States District Court, Southern District of  
4 California, Respondent entered a plea of guilty to count 1 of the indictment.

5       25. On November 1, 2012, a Findings and Recommendation of the Magistrate Judge  
6 Upon a Plea of Guilty, was signed by Hon. Jan M. Adler, United States Magistrate Judge.

7       26. On November 19, 2012, an Order Accepting Guilty Plea, was signed by Hon.  
8 Anthony J. Battaglia, U.S. District Court Judge.

9       27. On September 19, 2013, the United States District Court Judge signed a Joint Motion  
10 Continuing the Sentencing of Respondent.

11                               **SECOND CAUSE FOR DISCIPLINE**

12                               (Commission of Acts Involving Dishonesty or Corruption)

13       28. By reason of the allegations set forth above, in paragraphs 21 through 27, which are  
14 incorporated herein as if fully set forth, Respondent is subject to disciplinary action under section  
15 2234, subdivision (e), of the Code in that he has committed acts involving dishonesty or  
16 corruption which are substantially related to the qualifications, functions, or duties of a physician  
17 and surgeon.

18                               **THIRD CAUSE FOR DISCIPLINE**

19                               (Excessive Prescribing)

20       29. By reason of the allegations set forth above, in paragraphs 21 through 27, which are  
21 incorporated herein as if fully set forth, Respondent is subject to disciplinary action for excessive  
22 prescribing, in violation of section 725 of the Code.

23                               **FOURTH CAUSE FOR DISCIPLINE**

24                               (Rebates for Patient Referrals)

25       30. By reason of the allegations set forth above, in paragraphs 21 through 27, which are  
26 incorporated herein as if fully set forth, Respondent is subject to disciplinary action for receiving  
27 rebates for patient referrals in violation of section 650 of the Code. More specifically,  
28 Respondent, in effect, referred patients to the pharmacy, by writing prescriptions which were

1 delivered to the pharmacy, in exchange for cash payments.

2 **FIFTH CAUSE FOR DISCIPLINE**

3 (Violation of Drug Statutes)

4 31. By reason of the allegations set forth above, in paragraphs 21 through 27, Respondent  
5 is subject to disciplinary action for unprofessional conduct under section 2238 of the Code.

6 **SIXTH CAUSE FOR DISCIPLINE**

7 (General Unprofessional Conduct)

8 32. By reason of the allegations set forth above, in paragraphs 21 through 31, Respondent  
9 is subject to disciplinary action for unprofessional conduct under section 2234 of the Code.

10 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,  
11 and that following the hearing, the Medical Board of California issue a decision:

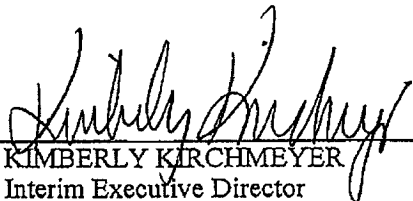
12 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 31509,  
13 issued to Tyron C. Reece, M.D.;

14 2. Revoking, suspending or denying approval of Tyron C. Reece, M.D.'s authority to  
15 supervise physician assistants, pursuant to section 3527 of the Code;

16 3. Ordering Tyron C. Reece, M.D. to pay the Medical Board of California, if placed on  
17 probation, the costs of probation monitoring; and

18 4. Taking such other and further action as deemed necessary and proper.

19  
20  
21 DATED: November 14, 2013

  
KIMBERLY KIRCHMEYER  
Interim Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
Complainant

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